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**THE NEUROLOGY CENTER PLC, Inc.***MY COPY*0453214  
*Dennis C. Dafnis, M.D.*

Coldwater Main Office 23 North Hamlett Street Coldwater, MI 49036 Phone: (517) 278-3412 Fax: (517) 278-6115	Jonesville Office: 216 Olds Street Jonesville, MI 49250 Phone: (517) 849-9005	Angola Office: 306 E. Maumee St., Suite 1 Angola, IN 46703 Phone: (260) 665-6842	General Adult Neurology Neurodiagnosis EEG-EMG-NCV Balance Disorders
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amitriptyline 25 mg tablet, oral.  
 amlodipine 5 mg tablet, oral.  
 isosorbide mononitrate 10 mg tablet, oral.  
 metoprolol tartrate 100 mg tablet, oral.

**Allergies (if any):**NKDA N/A.**Past Medical History (as stated by patient):**

Complex regional pain syndrome I of left lower limb. Radiculopathy, lumbosacral region.

**Review of Systems:****Constitutional:** The patient complained of recent illness but denied night sweats, anorexia, chills, diaphoresis, fatigue, fever, insomnia, malaise, weight gain/obesity and weight loss.**Neurologic:** The patient complained of gait abnormality, pain, limb, paresthesia and weakness but denied alteration of consciousness, aphasia, ataxia, dizziness, dyskinesia or tremor, headache, hearing loss, memory loss, mental status change, pain, back, pain, facial, pain, generalized, neck pain, paresis, seizure, spasms/spasticity, speech difficulties, syncope, tinnitus, vertigo and vision change.**Psychiatric:** The patient denied alcohol abuse, anxiety, conversion/dissociative phenom, depression, disturbances of consciousness, disturbances of emotion, disturbances of memory, disturbances of thinking, drug abuse, eating disorder, hallucination, mania, psychosis and suicidality.**Physical Exam:** 201 lbs 5' 9" 118/72 mmHg**Constitutional:**general appearance- overall: well nourished, well developed, in no acute distress, no deformities and well groomed; assistive Device: **walker****Neurologic:**

eyes- Left eyes normal; Right eyes normal; Left pupils accommodation intact and equal, round, and reactive to light direct and consensually; Right pupils accommodation intact and equal, round, and reactive to light direct and consensually; gait and station; ambulates with **walker**; strength & tone - LE; Left strength distal weakness, foot drop and standing upright without help; Right strength standing upright without help and weight bearing; strength & tone - UE; Left strength normal; Right strength normal; vestibular; Left nystagmus: **no nystagmus**; Right nystagmus: **no nystagmus**; orientation and mood; overall: alert, oriented to person, place and time and normal mood and affect; memory; remote memory: intact remote memory and normal recollection of past events; recent memory: intact recent memory; immediate memory: intact immediate memory; attention span and concentration; except: **good concentration, attention span, and immediate recall**; language and speech; overall: normal quality, no aphasia, normal naming and repeating, normal quality, quantity, rate and unimpaired reading, writing; fund of knowledge; overall: normal vocabulary; sensation; overall: **decrease sensation in L5-S1 dermatome and decrease sensation in L4-5 dermatome**; deep tendon reflexes; overall: **all testable reflexes normal**; coordination; overall: **no dyskinesias**, intact fine motor movement, no dysdiadochokinesis, no dysmetria, no pronator drift and no tremors

**Diagnosis:**

M54.17-724.4 Radiculopathy, lumbosacral region

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**General Adult Neurology**  
**Neurodiagnosis EEG-EMG-NCV**  
**Balance Disorders**

**NAME OF PATIENT:** Patrick Wilson

**DATE OF BIRTH:** February 19, 1971

**DATE OF EVALUATION:** August 17, 2020

**REFERRING PHYSICIAN:** Dr. Suzanne Groff

Dear Dr. Groff,

I had the pleasure of seeing your patient, Patrick Wilson, on August 17, 2020.

**Chief Complaint:**

He presented with pain, limb. It is located Left Ankle and left foot. It is described as discomfort, sensitive to touch and sharp. The complaint moderately limits activities.

In addition, he presented with paresthesia. It is located on the left foot. It is described as weakness.

The patient also presented with balance abnormality. It is described as difficulty walking. The assistive devices include wheel walker.

He next presented with pain, back. It is located in the low back area.

New patient referred for EMG NCS of the lower extremities. States in 2017 he was walking around the facility gym and rolled his left ankle. States there was a "popping" and after quite a bit of swelling. Two weeks later had x-rays that were reportedly negative. Six months later an MRI of the left ankle revealed no tears per pt. Pt continues to have very decreased movement of the left foot and ankle and can not pull the foot up due to weakness and significant pain. When ambulating can not put his foot flat on the floor due to significant pain. States he has been diagnosed at prior facilities with complex regional pain syndrome and various treatment have been recommended such as medications including gabapentin, braces and "gym shoes" but so far he has not received these. Continues to have very intense pain in the left foot and ankle and swelling with a "warming up" of the left knee. He notes also some episodes of sciatic pain that have been so intense he has to crawl from bed.

**Current Medications (if any):**

Absorbbase topical ointment, topical.

calcium oral

triamcinolone acetonide 0.1 % topical ointment, topical.

albuterol inhalation

hydralazine 100 mg tablet, oral.

acetaminophen 325 mg tablet, oral.

aspirin 325 mg tablet, oral.

atorvastatin 40 mg tablet, oral.

pantoprazole 40 mg tablet,delayed release, oral.

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**Balance Disorders**

G90.522-337.22 Complex regional pain syndrome I of left lower limb

**Services Performed:**

OFFICE/OUTPATIENT VISIT NEW  
 MUSC TEST DONE W/N TEST COMP  
 NRV CNDJ TST 5-6 STUDIES

**Test Results (if applicable):**

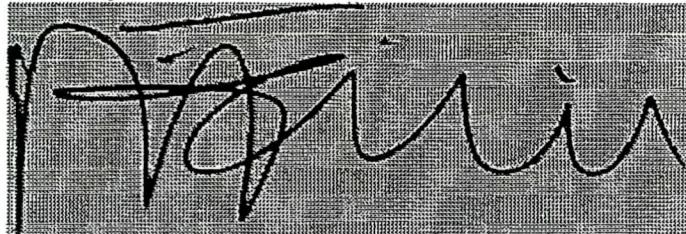
EMG NCS of the lower extremities is an abnormal study with evidence of chronic advanced L4-L5 L5-S1 radiculopathy bilaterally. There is evidence of complex regional pain syndrome of the left ankle and dorsum of the foot. No acute findings.

**Services Ordered (if applicable):**

Discussed with the patient our findings and recommended follow up with PCP for further recommendations.

Thank you for allowing me to participate in the care of your patient. If you have any questions please feel free to call me.

Sincerely,



Dennis C. Dafnis, M.D.

**Michigan Department of Corrections****Medical Detail Special Accommodations**

Off #: 0453216

Offender Name: WILSON, PATRICK DEWAYNE

No Work  
 Lay In

Exp. Date: \_\_\_\_\_  
 Exp. Date: \_\_\_\_\_

**Housing Restriction:****Restriction**

Bottom Bunk

Electrical Outlet Required

**Expiration Date****Physical Limitation/Restriction****Restriction**

H-Hearing Impaired

N-Per Audiogram, May House at a Non Designated Fac

**Expiration Date****May have the following equipment in his / her possession:**

Equipment	Start Date	End Date	Return Date
Extra Sheet	06/08/2022	02/28/2023	
Solar Shields	06/08/2022	02/28/2023	
ACMO approved on 12/11/2019 indefinitely			
Special Garment	06/08/2022	02/28/2023	
Knee high Ted hose x 2 pair			
Prescription Shoes - Athletic	06/08/2022	02/28/2023	
ACMO approved indefinitely 8/4/2021			
C-Pap	02/15/2022		
DeVilbiss Auto sn HD211767 (hr's 29.3)			
Humidifier sn HH415278.			
Mask: Amar FF Gel Lg #1090406.			
Distilled Water.			
Wheelchair - Distance	02/08/2022	02/28/2023	
Extra Pillow	02/08/2022	02/28/2023	
1 extra pillow with case			
Rollator	01/26/2022	01/26/2023	
ACMO approval 1/26/22 x 1 year			
Brace - AFO	01/26/2022	02/28/2023	
Left ankle/foot Custom fit orthotic AFO			
ACMO approved indefinitely 1/26/22			
HA-Hearing Aid	01/24/2022		
1/24/22 Bilateral BiCROS hearing aids w/ manual, batteries, cleaning brush, storage case, rubber domes, earwax guard & replacement tool provided.			
ACMO approved indefinitely 1/5/22			

Comments: N/A

06/08/2022

Date

Offender Name: WILSON, PATRICK DEWAYNE Off #: 0453216 Lock: B1:046:Bot:B1

ALL EXPIRATION DATES ARE AT 24:00



## AFTER VISIT SUMMARY

Patrick D. Wilson DoB: 2/19/1971

1/10/2023 7:00 AM Henry Ford Allegiance Pain Management Center 517-205-4841

Instructions from Alik Saidov, MD

Your personalized instructions can be found at the end of this document.



### Talk with your provider about your medications

- ?
- ASK how to take:  
**ABSORBASE TOP**

**albuterol** 90 mcg/actuation inhaler (VENTOLIN HFA)  
**amitriptyline** 50 MG tablet (ELAVIL)  
**aspirin** 325 MG tablet  
**atorvaSTATin** 40 MG tablet (LIPITOR)  
**atorvaSTATin** 10 MG tablet (LIPITOR)  
**calcium carbonate** 200 mg calcium (500 mg) chewable tablet (TUMS)  
**ciclesonide** 80 mcg/actuation inhaler (ALVESCO)  
**fluticasone propionate** 50 mcg/actuation nasal spray (FLONASE)  
 **gabapentin** 600 MG tablet (NEURONTIN)  
 **gabapentin** 300 MG capsule (NEURONTIN)  
**hydrALAZINE** 50 MG tablet (APRESOLINE)  
**isosorbide mononitrate** 10 MG tablet (ISMO)  
**losartan** 25 MG tablet (COZAAR)  
**metoprolol tartrate** 50 MG tablet (LOPRESSOR)  
**multivitamin** tablet (THERAGRAN)  
**pantoprazole** 40 MG DR tablet (PROTONIX)  
**triamcinolone (KENALOG) cream** 0.1 % cream

See the medication list below for HOW to take these medications



### Lumbar/Caudal Epidural

Expires: 7/9/2023 (requested)  
Left L4-5 LESI

### Today's Visit



You saw Alik Saidov, MD on Tuesday January 10, 2023 for: Complex regional pain syndrome of left lower limb. The following issue was addressed: Lumbar nerve root disorder.



Blood Pressure  
106/63



BMI  
30.99



Weight  
216 lb



Height  
5' 10"



Temperature  
(Temporal)  
98 °F



Pulse  
76



Respiration  
18



**Return for Left L4-5 LESI.**

You have received a **jpay** letter, the fastest way to get mail

From : Jen Baker, CustomerID: 25438752  
To : PATRICK WILSON, ID: 453216  
Date : 1/11/2023 1:58:33 PM EST, Letter ID: 1674368326  
Location : LCF  
Housing : B1046BOTB1

Hello Mr. Wilson,

This is the letter I just sent to the quartermaster at your facility:

Hello, Mr. Gwaltney:

My name is Jen Baker, and I am an Investigator-Advocate with Disability Rights Michigan (DRM).

DRM is the independent, federally mandated, governor appointed agency, designated to advocate and protect the legal rights of people with disabilities in Michigan. I am assigned to the DRM Community and Institutional Rights (CAIR) division as the dedicated Investigator-Advocate for disability-related issues in Michigan Department of Corrections (MDOC).

In June of last year, medical provider Suzanne Groof approved a special accommodation for Patrick Wilson #453216, for 928v3 Prescription ACMO Approved Gym Shoes. Everything was properly filled out and necessary paperwork was forwarded to the Quartermaster at that same time. Mr. Wilson contacted me in August, after not hearing anything about his shoes for two months. Since that time, I have continued to communicate with Mr. Wilson, encouraging him to give the quartermaster time, as there have been significant and continuous breakdowns in global supply chains, affecting us all. However, the length of time that has passed since the shoes were or should have been ordered is no longer something I can make excuses for, and I will not continue to spin this man. We are literally in a new year. Patrick Wilson has a disability recognized under the Americans with Disabilities Act, and those shoes are an assistive device and medical accommodation for his disability.

I am requesting the following information:

- \* Date order was placed for the 928v3 Prescription ACMO Approved Gym Shoes (specifically), that were authorized as a medical accommodation by Suzanne Groff for Patrick Wilson.
- \* Documentation explaining the substantial delay in issuing new 928v3 Prescription ACMO Approved Gym Shoes to Mr. Wilson.
- \* Estimated date that Mr. Wilson will receive his approved prescription shoes from the Quartermaster.

Mr. Gwaltney, I am addressing this issue with you, specifically, as a courtesy. Should I not receive a response from you by Wednesday, January 18, 2023, I will forward my concerns to the state ADA Coordinator, and I will request that MDOC Office of Legal Affairs investigate the handling of this issue. If you have any questions for which I might be able to provide assistance, please feel free to contact me at my direct line, or contact me via email. You can also find out more about DRM's authority within MDOC by reviewing Policy Directive 03.02.135.

MICHIGAN DEPARTMENT OF CORRECTIONS  
LAKELAND CORRECTIONAL FACILITY  
141 First Street  
Coldwater, Michigan 49036

To: Mr. Anthony Gwaltney, QM-Supervisor

From: Patrick D. Wilson # 453216 B-1-46

RE: My Approved ACMO Prescription Athletic Shoes  
( New Balance 928 v 3 )

Date: September 2, 2022

Good Day, Mr. Anthony Gwaltney,

I am sending you this correspondence in regards to the above reference; On June 8, 2022 I saw my Medical Provider Mrs. S. Groff, On the above matter, Mrs. S. Groff, gave me a new special accommodation for a new pair of my Approved ACMO Prescription Athletic Shoe of New Balance 928v3 Gym Shoes. I sent in my quartermaster sheet on the 10th of June 2022, But it was returned to me with no reson why my shoes was ordered on June 11, 2022.

So I resent my QM Sheet along with a letter, asking why my Shoes wasn't process. So on today I, saw My Medical Provider Ms. S, Groff, and I had informed her, it's 3 months, and I still haven't received my shoes. So she told me to write this letter, in hopes to find out when they were ordered?

So Mr. Gwaltney, Mrs. Groff, also might be sending you a email as well concerning this matter. Because she stated I should've gotten my shoes by now. Thank you for your cooperation, with this matter.

c.c./file: p.d.w.

We did not receive a ride about medical shoes. Healthcare cannot determine what brand or style shoe you have. It is based on the width of your foot. I will place an order for your shoes. When they come in, please bring your current shoes with you to the callout.

Respectfully Submitted  
Patrick D. Wilson

Patrick D. Wilson # 453216

Thank you,  
A. Gwaltney  
Warehouse Supervisor